

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S. Z		06-28-01
O.P.E. CLASSIFIER			6-30-01
FORMALITY REVIEW	M. M	572	08-10-01
RESPONSE FORMALITY REVIEW			

Best Available Copy

INDEX OF CLAIMS

✓ Rejected  
 □ Allowed  
 (Through numeral) Canceled  
 + Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Date
1	2/12/01
2	2/12/01
3	2/12/01
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Claim	Date
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If more than 150 claims or 10 actions  
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09/882985